

Issues Relating to State Operated Psychiatric Hospitals and ADATCs

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Division of State Operated Healthcare Facilities

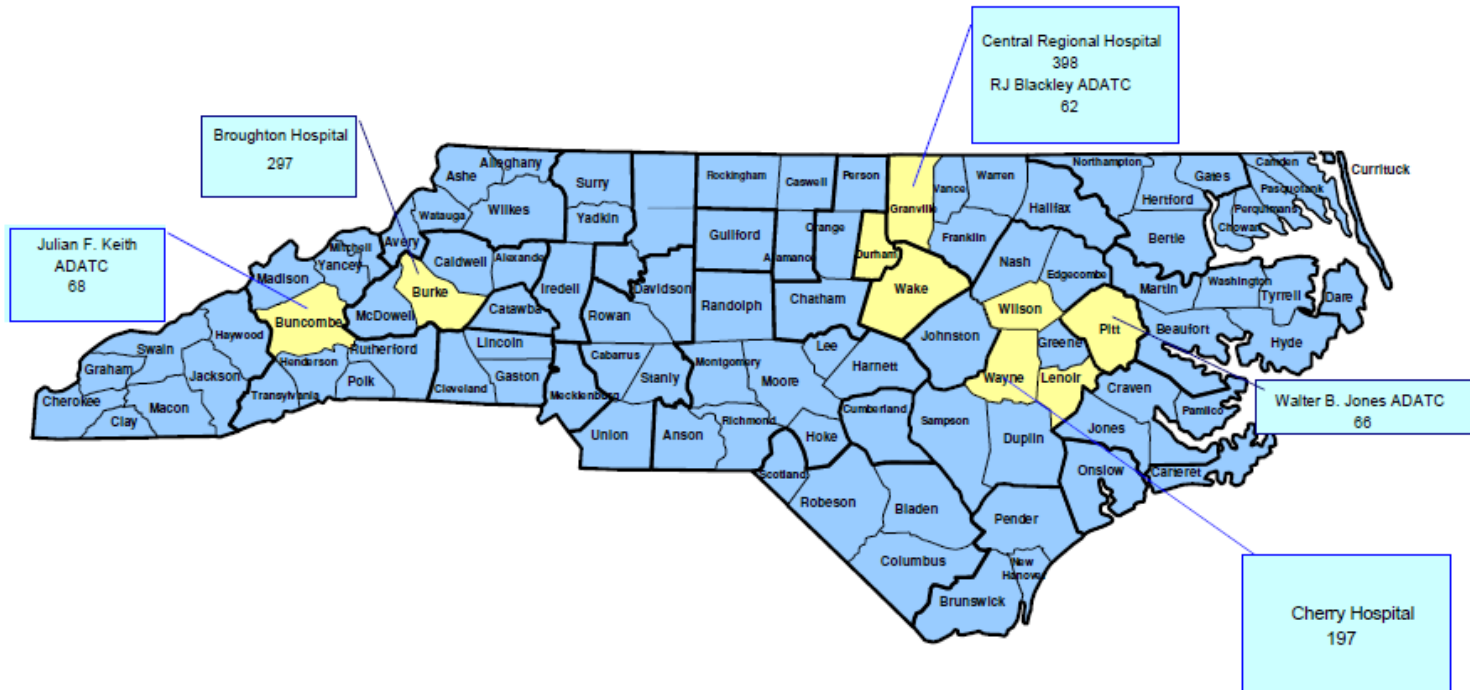
January 24, 2014

Mission

**We are a system of healthcare facilities that
respects the dignity of individuals and
provides individualized, compassionate,
efficient, quality care
to the citizens of North Carolina
with
developmental disabilities,
substance use disorders and
psychiatric illnesses
and
whose needs exceed
the level of care
available in the community.**

State Operated Hospitals & ADATCs

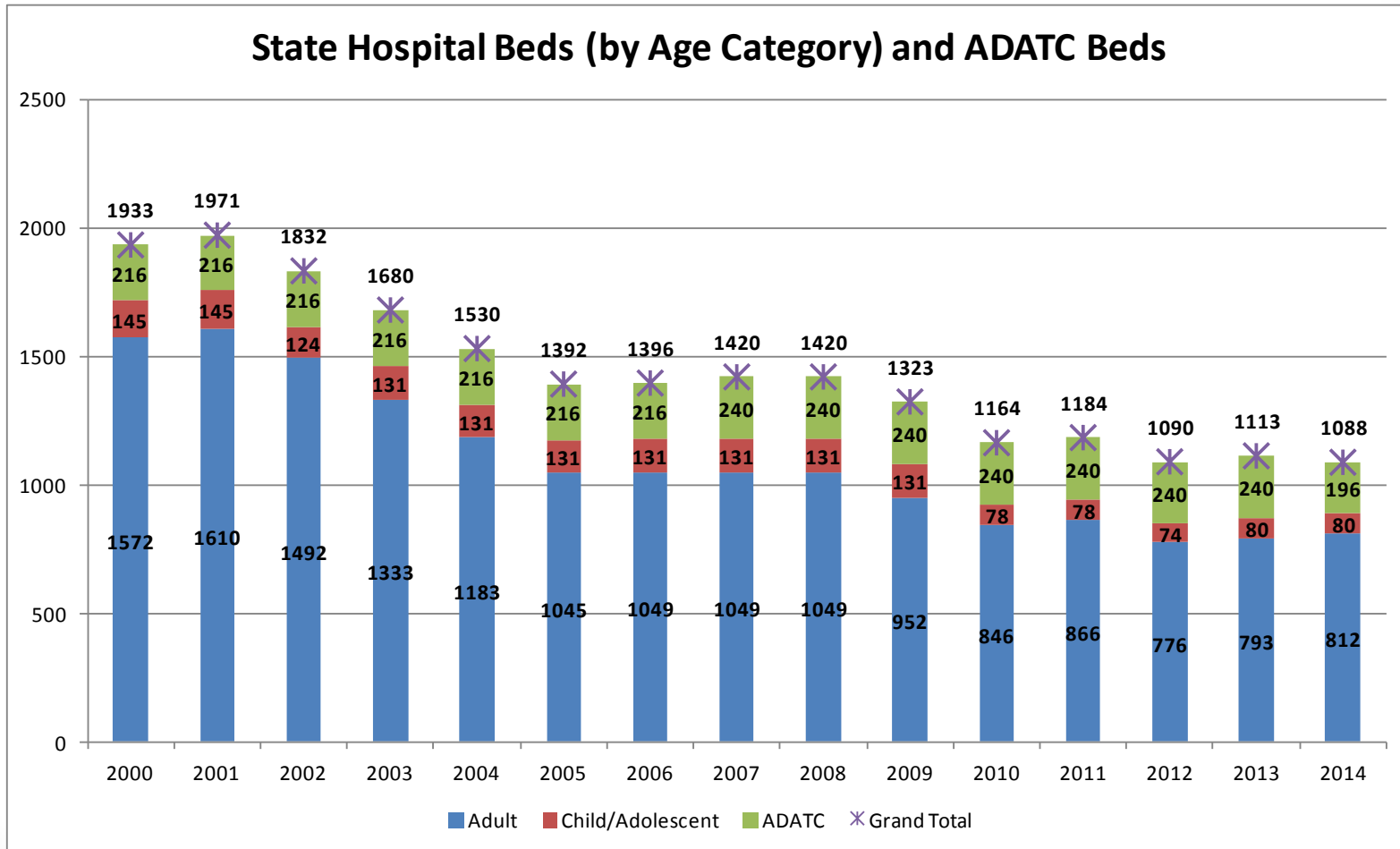
County Map of State Facilities



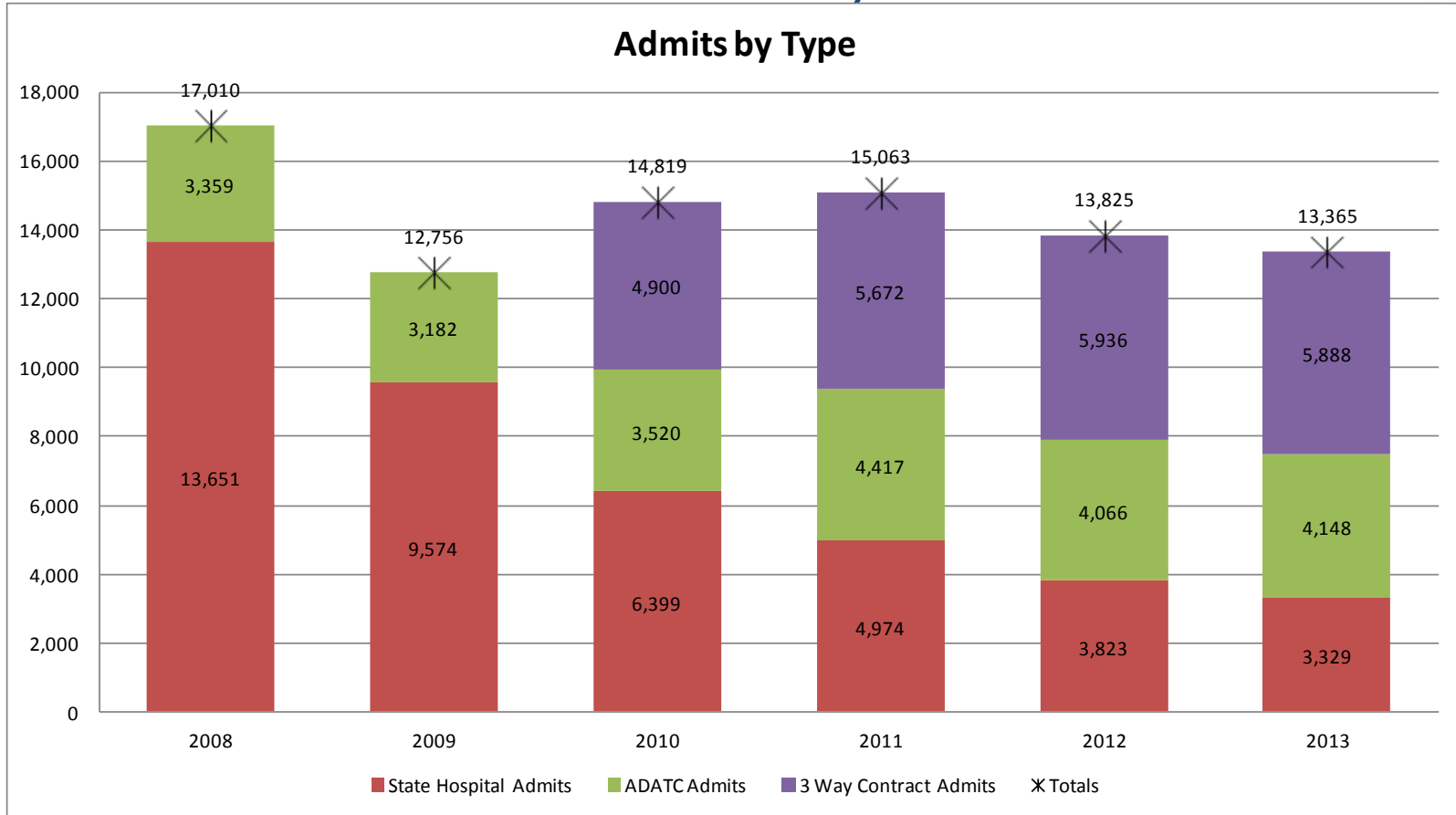
Significant Events

- Hospital Downsizing: SFY2002 to SFY2005 (scheduled to continue to SFY2006, but stopped early due to continued high admissions)
- Admission Delays in Hospitals: February 6, 2007
- Completion of ADATC conversion from rehabilitation model to hospital level acute care: SFY2009

Bed Capacity in State Operated Hospitals and ADATCs

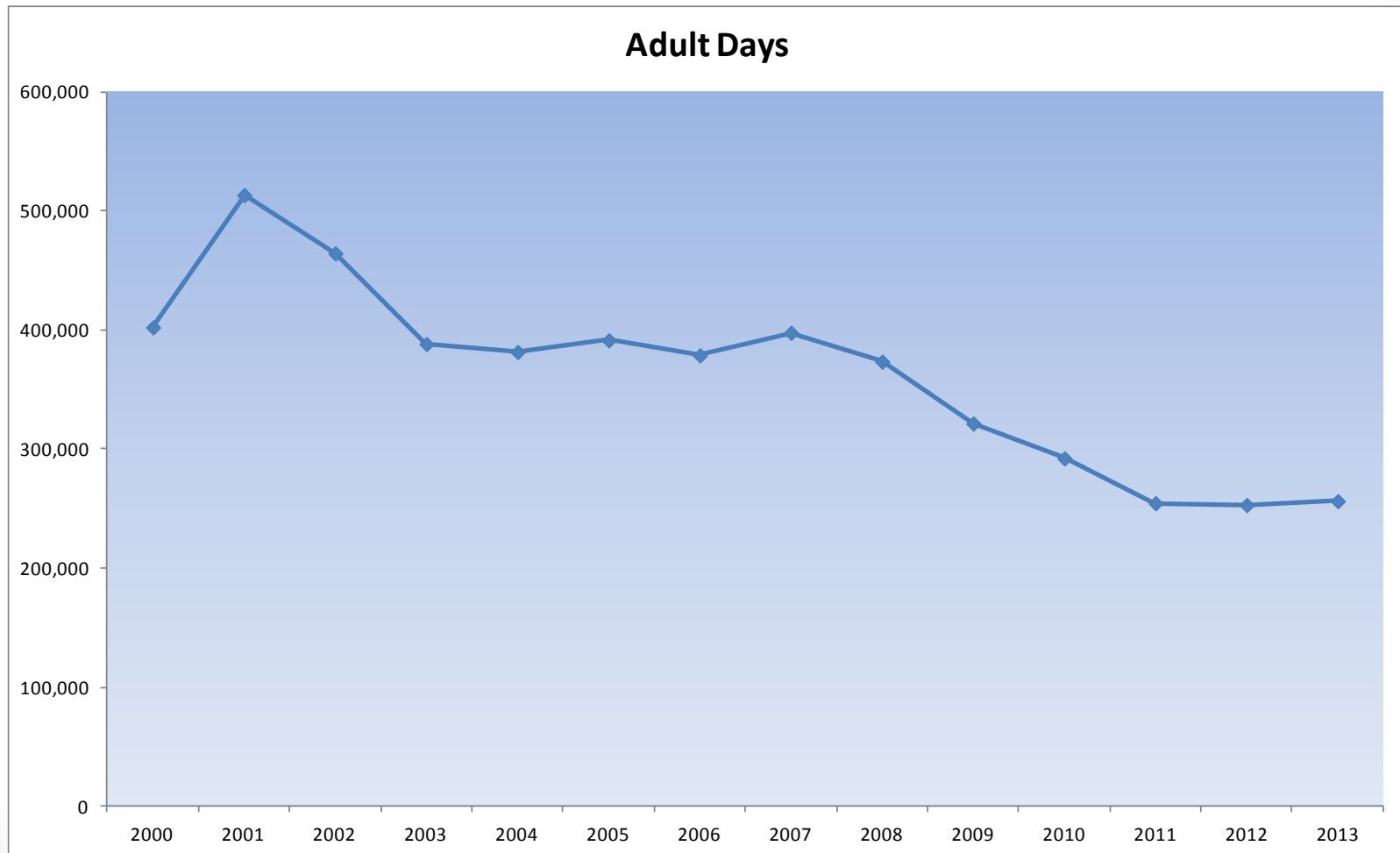


Admissions to State Hospitals, ADATCS and State funded 3-way contracted beds

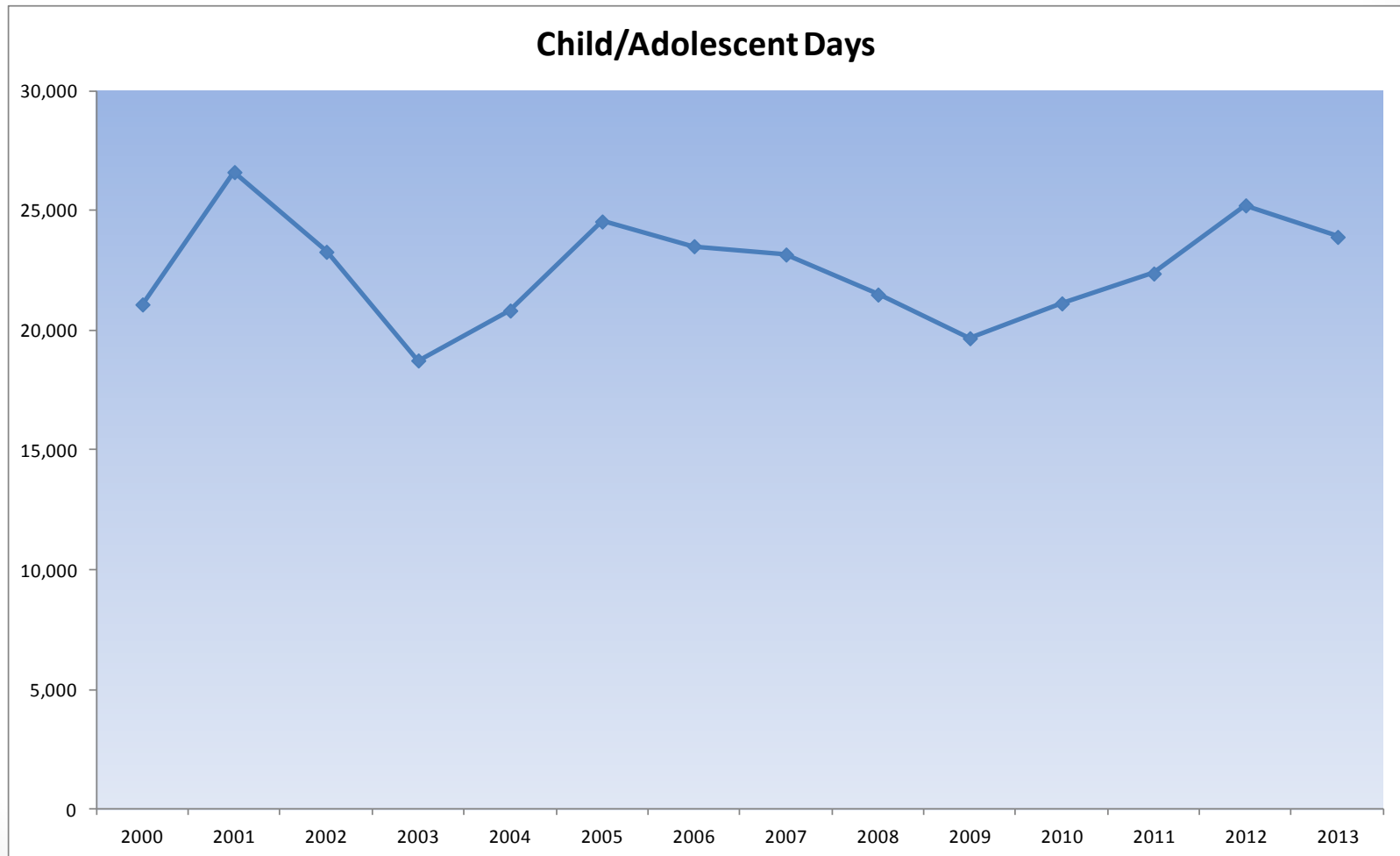


Note: 2013 Admits to 3 Way Contract Beds do not include claims processed by NCTracks or denied claims.

State Hospitals – Patient Days (Adults)



State Hospitals – Patient Days (C&A)



Staffing Issues and Flexibility

- Hard to Recruit Positions: physicians, physician extenders, nurses, allied health professionals (i.e. social workers, psychologists, SA counselors, etc.)
- Flexibility granted by the GA: allows for targeted salary considerations for medical and allied health professions (i.e. retention, equity and market)
- Salary Adjustment Fund: once formally approved, is expected to provide salary increases to specific classifications including physicians and nursing which will result in improved retention and recruitment